AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS

TYPE: []IXC []CLEC [x]ILEC []Wireless 003.21.15

	CERTIFICATED COM	IPANY INFORMATION
BellSouth Telecommi		-
Company Name	***************************************	FEIN/SSIN
AT&T South Carolina	<u> </u>	803-401-2252
Dba/lka		Telephone #
1600 Williams St., Suite	5470	,
Mailing Address	***************************************	
Columbia,SC 29201		
City, State, Zip Code		
1600 Williams St., Suite	5470	
Business Location		
Columbia,SC 29201		Diskla 4
City, State, Zip Code		Richland County
		County
	REGISTERED AGE	NT INFORMATION
Registered Agent: C T Co	rporation	
<del>-</del>		
Mailing Address: 2 Office	Park Court, Suite 103	
City Canal Tim Co. 1		
City, State, Zip Code: <u>Colu</u>	umbia, SC 29223	
Direction to the Commission	anadam an dan an an an an an an an	
Fursuant to the Commission	in s rules and regulations, p	print or type company contact for the following areas:
A. Pamela Lackey		A CONTRACTOR OF THE PROPERTY O
General Manager (Include a	address if different than above.)	
803-401-2205	,	1145400 11
Telephone Number	/ 803-771-4680 Facsimile Number	/ pl4151@att.com E-mail Address
Mike McGee and Ja	ımie Hajj, 575 Morosgo Dr., N	NE, Room 06E69, Atlanta, GA 30324
	aints Representative (Include	· · · · · · · · · · · · · · · · · · ·
877) 404-2417/404-986-1009 (Mike); 4 Telephone Number	04-986-8402 (Jamie) / N/A / AI	tt_Regulatory_Referrals@amcustomercare.att-mail.com
relephone Number	Facsimile Number	E-mail Address
C1. <u>Cindy Cox, 1600</u>	Williams St, Columbia SC	29201
Customer Relations/Compla	aints Representative for Escala	ited Complaints (Include address if different than above.)
803-401-2252	/ 803-771-4680	/ cc2283@att.com
Telephone Number	Facsimile Number	E-mail Address
22. <b>AT&amp;T 800-288-2</b>	020 (recidential customore)	866-620-6000 (business customers)
Customer Contact (Toll Free	Number)	600-020-0000 (business customers)
Cindy Cox		
Engineering Operations (Inc	clude address if different than ab-	ove.)
803-401-2252	/ 803-771-4680	/ cc2283@att.com
Telephone Number	Facsimile Number	E-mail Address
Cindy Cox		
Test and Repair (Include ad	dress if different than above.)	MARKET 1997
803-401-2252	/ 803-771-4680	cc2283@att.com

	Telephone Number	Facsimile Number		E-mail Address			
F.	Cindy Cox						
	Emergencies (During non-office hours)						
	803-414-6911 (cell)	1		/ cc2283@att.com			
	Telephone Number	Facsimile Number	***************************************	E-mail Address			
<u>ado</u>	dition, please provide the following	ng company contact inform	ation	to assist in proper routing of correspo	ondence and invoice		
١.	Cindy Cox						
	Regulatory Contact (Include address if different than above.)						
	803-401-2252	/ 803-771-4680	1	cc2283@att.com			
	Telephone Number	Facsimile Number	***************************************	E-mail Address			
4.	Nancy Groninger Dual Party Mailings (Name)		***************************************	410,000,000			
	Mailing Address	11760 US Highway One, Room 611, North Palm Beach, FL 33408					
	<u>561-775-4105</u>		1	ng4692@att.com			
	Telephone Number	Facsimile Number		E-mail Address			
	Cindy Cox						
	Interim LEC Fund Mailings (I	Interim LEC Fund Mailings (Name)					
	See above	- ' '					
	Mailing Address				~		
		1	1				
	Telephone Number	Facsimile Number		E-mail Address	***************************************		
	Cindy Cox						
	Universal Service Fund Mailings (Name)						
	See above				•		
	Mailing Address		****************		***************************************		
	* 1 - 1				·		
	Telephone Number	Facsimile Number		E-mail Address			
	Cindy Cox	······································			~~~		
	Gross Receipts Mailings (Name)						
	See above	***************************************	******************************				
	Mailing Address	į					
	Telephone Number	Facsimile Number		E-mail Address			
	•	r acamme ryumber		E-mail Address			
	Cindy Cox Lifeline Mailings (Name)	***************************************	······				
	See above Mailing Address		***************************************				
	Maning Address	1	1				
	Telephone Number	Facsimile Number	***************************************	E-majl_Address			
	Cindy Cox			Cordey Cox			
	This form was completed by (print name)			Signature			
	Executive Director, Regulatory			3/24/15			
	Title			Date			
	RETURN COMPLETED FORM TO:				•		
	Public Service Commission of SC			Office of Regulatory Staff			
	Docketing Department			Attn: Jeanne Gordon			
	Post Office Drawer	11649		1401 Main Street, Suite 900			
	Columbia, South Ca	rolina 29211		Columbia, South Carolina 29201	(Pay DSC AUSA)		